

1. Name of Lobbyist(s):

(Print Name of lobbyist)

STATE OF NEW HAMPSHIRE 2018 Statement of Income and Expenses for LOBBYISTS

(RSA Chapter 15)

RECEIVED

JAN 3 0 2019

PLEASE PRINT

Paul A. Worsowicz; Lisa K. Shapiro, Ph.D.; Ari B. Pollack

NEW HAMPSHIRE DEPARTMENT OF STATE

II. Name of Lobbyist's partnership, firm or corporation, if any:

worsowicz@gcglaw.com (Email) OR you may file a separate report for relative to the following client. C. ration Form) or the lobbying firm listed below which are
relative to the following client. C. ration Form)
C. ration Form)
ration Form)
or the lobbying firm listed below which are
July 25, 2018 🔲
from 4/1/18 to 6/30/18
January 30, 2019 🗵
from 10/1/18 to 12/31/18
the last report. X 's Office, State House, Room 204,
- Fees and Expenses
endum B – Report of Honorariums or file Addendum C – Political Contributions
regoing information is true and complete
1-24-19
֓֡֜֜֜֜֜֜֜֜֜֜֜֜֜֜֜֜֜֜֜֜֜֜֜֜֜֜֜֜֜֜֜֜֜֜֜֜



STATE OF NEW HAMPSHIRE Lobbyists Fees and Expenses Addendum A

(RSA Chapter 15:6)

I. Name of Lobbyist(s)	Paul A. Worsowicz; Lisa K. Shapiro, Ph.D.; A	ri B. Polla	ick	
II. Name of lobbyist's pa	rtnership, firm or corporation, if any:			
	GALLAGHER, CALLAHAN & GARTRE	ELL, P.C.		
	(Name of partnership, firm or corporati	ion)		
III. Name of Client	. Name of Client DEMOULAS SUPER MARKETS, INC. Da			
lobbying, including fees for	of all fees received from the client identified above or services such as public advocacy, government relating legislation, and related legal work. The gross	ations, or p	oublic relatio	ns services,
a) Total of all fees receive	ed in this reporting period		a) \$.00
	ed this calendar year, prior to this reporting period. total prior monthly reports for this calendar year.)	·	b) \$ 	2,275.00
c) Total of all fees receive (Add lines a and b)	ed to date.		c) \$	2,275.00
d) Indicate the amount of yet been paid.	any such fees that are due, but have not		d) \$.00
fees. Separate reports are lobbyist(s)/firm that are us are to be reported in one reporting period for salar expenses where the expenses where the expenses where the expenses of a ceremonial extatement of each individual covered by (a) (for example given to the subject of los legislative reception). Expenses are lobbyisted in the subject of los legislative reception).	tnerships, firms, or corporations are required to re- to be filed for expenditures made relative to each contrelated to any one client a separate report may be of three categories of expenses: (a) the aggregaties, benefits, support staff, and office expenses; (diture was of \$25.00 or less (for example: meals particularly specified by the control of	lient and iffiled for the total of (b) the agginurchased of hat is give to of \$25.00 f greater than \$5 ater \$	f expenditure he lobbyist(s f all expense gregate total during a busion to the perso) or less); are \$25.00 fc se of a cerem \$50, restaura	is are made by the all firm. Expense is paid during the of all individual iness lunch where on being lobbied and (c) an itemized any purpose no nonial object to be on the expenses for a second of the expenses for any purpose of the expenses for a second of the expenses for a second of the expenses of
support staff, and office ex	tes for this reporting period for salaries, benefits, expenses, related directly or indirectly to lobbying.	a) \$ b) \$.00
b) Total aggregate of experim a), of \$25 or less.	enditures during this reporting period, not reported	c) \$.00
c) Total of all itemized ex	spenditures reported in detail in section VI.	υ, ψ		00_

Lobbyist Fees & Expenses, Addendum A – Page 2 Client: DEMOULAS SUPER MARKETS, INC.		
d) Total expenses for this reporting period. (Add lines a, b and c.)	d) \$.00
(Add lifes a, b and c.)	a) 5	.00
e) Total of expenses paid this calendar year, prior to this reporting period.		
(This should be the amount on line f of addendum A for last month's report.)	e) \$	1,962.50
	2.0	
f) Total of all expenses year to date.	f) \$	1,962.50
VI. Other Expenses:		
Provide the following detail for all expenditures of more than \$25 made from lobbying fees period, including by whom paid or to whom charged.	s during this i	reporting
Paid to:	Amo	wint
	\$ ·	
	s	
	\$	
	\$	
<u></u>	§	
	— » —	
Sworn Statement/Affirmation by Lobbyist		
I have read RSA 15, RSA 15-B and RSA 664 and hereby swear or affirm that the f is true and complete to the best of my knowledge and belief.	oregoing in	formation
(Signature of lobbyist) 1-24	1-19	
(Signature of lobbyist) (Date)	
Paul A. Worsowicz		
(Print Name of Lobbyist)		

State of New Hampshire Signature Form for Associated Lobbyist RSA Chapter 15

Use this form to swear or affirm the truth and completeness of Income and Expense Statements and related Addendums

Swarn Statement/Affirmation by Labbuict

	me and Expenses for:		•
Name of Lobbying	partnership, firm or corpo	ration: GALLAGHER, CA	LLAHAN & GARTRELL, P.C.
Name of Client (lea particular client):	ive blank if Statement is fo Demoulas Super Marl		orporation and not related to any
Date of Report (ch	eck one):		
April 25, 2018 🗆	July 25, 2018 □	October 31, 2018 🗆	January 30, 2019 🔀
	-	e Statement of Income and E atement (insert the number o	Expenses described above, and the of Addendum forms being
1 Addendum A	(s).		
0 Addendum B	(s).		
0 Addendum C((s).		
•	ffirm that the foregoing in t of my knowledge and be		and each Addendum is true and
(Signature of Lobb			1 29 / 19 (Date)
	•		() (Date)
Lisa K. Shapiro, P (Print Name of lob			
(1 1111 140111 O1 101	70 J 131 j		

State of New Hampshire Signature Form for Associated Lobbyist RSA Chapter 15

Use this form to swear or affirm the truth and completeness of Income and Expense Statements and related Addendums

Sworn Statement/Affirmation by Lobbyist Statement of Income and Expenses for:

Statement of Incor	ne and Expenses for:		
Name of Lobbying	partnership, firm or corpor	ration: GALLAGHER, CA	LLAHAN & GARTRELL, P.C.
Name of Client (lea particular client):	ve blank if Statement is fo Demoulas Super Mark		rporation and not related to any
Date of Report (che	eck one):		
April 25, 2018 🗆	July 25, 2018 🗆	October 31, 2018 🗆	January 30, 2019 🗶
		Statement of Income and E tement (insert the number o	xpenses described above, and the f Addendum forms being
1 Addendum A	(s).		
0 Addendum B	(s).		
0 Addendum C((s).		
	ffirm that the foregoing int t of my knowledge and be		and each Addendum is true and
(Signature of Lobb	ovist)		(Date)
	yusty		(- 444)
Ari B. Pollack (Print Name of lot	obyist)		